

PAYMENT AGREEMENT GUIDE

Katie Beckett Premium Matrix

Nevada Division of Health Care Financing and Policy

This guide does not apply if the client has active full Medicaid / Nevada Checkup Plan. If you checked any box in #7 on the NMO-(), a payment for this client may not be required once documentation is verified.

This chart will give you the premium payment agreement amount your family is required to pay to receive continuous eligibility through the Katie Beckett Program. If you have questions or need help, please contact your case manager.

INSTRUCTIONS: Use the information you put on your Income Review/Payment Agreement form NMO-():

- Find the column for the **Family size**. Family size is the number you put on line #8 of the NMO-() form.
- Find the **Income range** in this same column that includes the income you put on **line #9** of the NMO-().
- Follow the row across to the right to find your **Monthly, Quarterly, Yearly Premium Agreement amount**.
- Indicate your choice (**Monthly, Quarterly, Yearly Premium Agreement amount**) from the chart below on **line #10** of the NMO-().

If your yearly payment agreement enrollment fee is Zero Dollars (\$0.00) (see chart below), you should qualify for State Plan Medicaid / Nevada Checkup. Please confirm with the Department of Welfare and Supportive Services (DWSS) to ensure your current eligibility.

You will still be responsible for any premium payment agreement once you sign even if the Katie Beckett coverage is voluntarily ended, services are not used, the recipient ages out of the program, or the recipient moves out of the State of Nevada. Katie Beckett premium payments are non-refundable.

FPL %	Family of 0-1	Family of 2	Family of 3	Family of 4	Family of 5	Family of 6	Family of 7	Family of 8	Family of 9	Family of 10		Monthly Premium	Quarterly Premium	Yearly Premium
	\$0 \$29,888	\$0 \$40,425	\$0 \$50,962	\$0 \$61,499	\$0 \$72,036	\$0 \$82,573	\$0 \$93,110	\$0 \$103,647	\$0 \$114,184	\$0 \$124,721		This income range might qualify you for another level of eligibility.		
205% - 249% of FPL	\$29,889 \$36,450	\$40,426 \$49,300	\$50,963 \$62,150	\$61,500 \$75,000	\$72,037 \$87,850	\$82,574 \$100,700	\$93,111 \$113,550	\$103,648 \$126,400	\$114,185 \$139,250	\$124,722 \$152,100		\$20.00	\$60.00	\$240.00
250% - 299% of FPL	\$36,451 \$43,740	\$49,301 \$59,160	\$62,151 \$74,580	\$75,001 \$90,000	\$87,851 \$105,420	\$100,701 \$120,840	\$113,551 \$136,260	\$126,401 \$151,680	\$139,251 \$167,100	\$152,101 \$182,520		\$35.00	\$105.00	\$420.00
300% - 399% of FPL	\$43,741 \$58,320	\$59,161 \$78,880	\$74,581 \$99,440	\$90,001 \$120,000	\$105,421 \$140,560	\$120,841 \$161,120	\$136,261 \$181,680	\$151,681 \$202,240	\$167,101 \$222,800	\$182,521 \$243,360		\$65.00	\$195.00	\$780.00
400% - 499% of FPL	\$58,321 \$72,900	\$78,881 \$98,600	\$99,441 \$124,300	\$120,001 \$150,000	\$140,561 \$175,700	\$161,121 \$201,400	\$181,681 \$227,100	\$202,241 \$252,800	\$222,801 \$278,500	\$243,361 \$304,200		\$125.00	\$375.00	\$1,500.00
Greater than 500% of FPL	\$72,901 no ceiling	\$98,601 no ceiling	\$124,301 no ceiling	\$150,001 no ceiling	\$175,701 no ceiling	\$201,401 no ceiling	\$227,101 no ceiling	\$252,801 no ceiling	\$278,501 no ceiling	\$304,201 no ceiling		\$250.00	\$750.00	\$3,000.00